PARENTS OF RENSSELAER MEMBERSHIP FORM

REGISTRANT INFORMATION

NAME OF FAMILY MEMBER(S)

STREET

PHONE NUMBER

CITY

STATE/ZIP

E-MAIL ADDRESS

STUDENT INFORMATION

STUDENT'S NAME

MAJOR/YEAR OF GRADUATION

STUDENT'S NAME

MAJOR/YEAR OF GRADUATION

ARE YOU OR A MEMBER OF YOUR FAMILY A RENSSELAER ALUMNUS? YES NO

WHAT YEAR?

☐ I would like to be added to the Parents Listserv, a biweekly e-mail update on the latest news and information at Rensselaer

I am interested in learning more about the following volunteer opportunities for parents (please check all that apply):

☐ Speaking with prospective Rensselaer parents

☐ Speaking with current students about career opportunities

☐ Other volunteer opportunities I would like to get involved with:

☐ Participating in Parent Orientation programming

We want to hear what interests you! Please share with us any topics that you would like to learn more about in future newsletters or other communications:

Mail or fax form to: Office of the First-Year Experience, Attn: *Parents of Rensselaer* Membership
Rensselaer Polytechnic Institute, 4100 Academy Hall, 110 8th Street, Troy, NY 12180 Fax: (518) 276-3372